

PART B - FEE(S) TRANSMITTAL

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7590

03/08/2004

David P Gordon Esquire
 65 Woods End Road
 Stamford, CT 06905

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/590,060	06/08/2000	John Edward Pfeifer	PFE-004	1011

TITLE OF INVENTION: AMPOULE ANALYZER APPARATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	06/08/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
ROSENBERGER, RICHARD A	2877	356-436000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Gordon & Jacobson, P.C.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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- ☒ Advance Order - # of Copies one(1)

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- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

*David P Gordon**June 7 2004*

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TRANSMIT THIS FORM WITH FEE(S)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: John Edward Pfeifer

Group Art Unit:

Serial No.: 09/590,060

Examiner:

Filed: June 8, 2000

Attorney Docket: PFE-004

Title: Ampoule Analyzer Apparatus

I hereby certify that this correspondence is being deposited on this day with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450.

David P. Gordon

June 7, 2004

David P. Gordon

Date

Honorable Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

ISSUE FEE TRANSMITTAL

Enclosed herewith please find a properly completed form PTOL 85b and a check in the amount of \$668 (\$665 Issue Fee, plus \$3 for one advance copy of issued patent) made to the order of the Commissioner Of Patents and Trademarks. This transmittal is timely in nature. Please be advised that the formal drawings are being submitted under separate cover.

The undersigned believes that this submittal together with the formal drawings completes the requirements for the issuance of a patent. If any additional fees are due or any refund due, please charge or credit them to my deposit account number 07-1732. If anything remains outstanding, please advise immediately so that delays and fees can be avoided.

Respectfully submitted,

David P. Gordon

David P. Gordon

Reg. #29,996

Attorney for Applicant(s)

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